

**Applicant Services Center** Phone: 206-684-8850

700 Fifth Avenue, Suite 2000 P.O. Box 34019

Seattle, WA 98124-4019

Hours: M/W/F, 7:30 am - 5:30 pm T/Th, 10:30am - 5:30pm

## **SCREENING & SUBMITTAL CHECKLIST**

Single Family Addition & Alteration INDEX 7

Project (A/P)Number:	Date:
Site Address:	
Applicant Name:	
LU Screener (initial):	OS Screener (initial):
APPLICANT REFERENCE INFORMATION (check for CAM 303 Applicant responsibilities & Plan Requirements in Single Family & 2-unit Dwellings CAM 106 General Standards for All Plans CAM 220 Lot coverage, Height & Yard Stds CAM 103 Site Plan Requirements	current versions)  CAM 303A Common Residential Code Requirements CAM 316 Subject-to-Field Inspection Permits Other (see other CAMs, Director Rules, etc):
THIS CHECKLIST HAS BEEN PROVIDED TO ASSIST THE APPLICANT IN PREPARING A COMPLETE APPLICATION. THE REQUIREMENTS APPLY TO ALL PROJECTS UNLESS NOT APPRPRIATE FOR THE TYPE OF PROJECT. IT IS THE RESPONSIBILITY OF THE APPLICANT TO COMPLETE THE CHECKLIST FOR THE APPROPRIATE REQUIREMENTS. REFER TO THE ASSOCIATED SCREENING STANDARDS FOR FURTHER CLARIFICATION.	
TYPE OF PLANS REQUIRED  □ DPD Coversheet for each set of plans □ Architectural/Structural Notes □ Land Use / Grading Notes □ Site Plan □ DPD Standard Drainage/Erosion Control Plan (TESC) □ ECA Standard (planting) Mitigation Plan □ Licensed Survey (to document non-conformities, contours for height bonus calc, etc) per City Datum	<ul> <li>☐ Grading Plan (could be on site plan if simple)</li> <li>☐ Building cross sections</li> <li>☐ Foundation Plans (if structural changes)</li> <li>☐ Floor Plans</li> <li>☐ Exterior Elevations</li> <li>☐ Framing Plans (if structural changes)</li> <li>☐ Construction details (stairs, shear walls, footings, shoring, retaining walls, etc</li> <li>☐ Other:</li></ul>
NUMBER OF PLANS REQUIRED (all sets must be iden (3) sets Other:	ntical)  Additional (1) set for ECA
ADDITIONAL SUBMITTALS REQUIRED  Financial Responsibility Form Contractor Disclosure Form Agent's Letter of Authorization from Owner Pre-application Site Visit Report Equipment Sizing Worksheet Target UA or System Analysis (if not using prescriptive path) Beam calculations(gravity load calcs) Geotech/Soils Report (3 copies) Lateral Engineered Calculations Prescriptive Lateral Design	<ul> <li>Short Plat / LBA Plans (preliminary or recorded)</li> <li>Construction Agreement, Temporary Shoring, or Soils Report for deep cut @ property line</li> <li>Side Yard Easement</li> <li>Accessory Structure Agreement</li> <li>Accessory Dwelling Unit (ADU/DADU forms)</li> <li>ECA exemption: #</li> <li>Pre-Application Form for Addressing approved prior to intake</li> <li>ECA covenants</li> <li>Other:</li> </ul>

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LAND USE CONSIDERATIONS (check the Land Use C	ode for specific development standards)	
☐ Sloping lot height bonus	Existing Non-conformities (survey required) Seattle	
Front yard averaging	Land use Code 23.42.100	
MUP/LBA/Short Plat number/Variance A/P# Recording#	SEPA for non-construction related grading in ECA or construction over water	
Special accessory uses (ADU, DADU, Adult Family	Historical Review District or Historical Landmark	
Home)	Shoreline	
Other:		
CONSTRUCTION CONSIDERATIONS (check the Building Code for specific development standards)		
☐ Height/Stories/Area/Type of Construction shown	☐ Deep Excavation at property line	
Demolition required	Tenant Relocation required	
Compliance with SRC and/or SBC	Other:	
COMMENTS:		
Provide a copy of this completed and/or marked-up checkli	ist at all additional screenings or intake appointments.	
READ AND SIGN THE STATEMENT BELOW FOR DROP-OFF APPLICATIONS.  I verify that I am complying with all of the submittal requirements appropriate to this project, and I		
acknowledge that failure to submit all of these requirements may result in my application not being accepted		
and/or may extend the length of time needed to review		
Applicant Signature:	Date:	

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